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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	I-2-91.7US
First Named Inventor	Ozluturk et al.
COMPLETE IF KNOWN	
Application Number	09/742,578
Filing Date	December 21, 2000
Group Art Unit	2631
Examiner Name	Not Yet Known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CODE DIVISION MULTIPLE ACCESS (CDMA) COMMUNICATION SYSTEM

(Title of the Invention)

the specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) 12/21/2000 as United States Application Number or PCT International Application Number 09/742.578 and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
08/956,740	10/23/1997	6,215,778
08/669,775	06/27/1996	5,799,010
60/000,775	06/30/1995	
09/003,104	01/06/1998	6,181,949
08/670,162	06/27/1996	5,841,768
09/304,286	05/03/1999	
08/671,068	06/27/1996	5,940,382

☒ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 24374 → *Place Customer Number Bar Code Label here*

OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Namely, the Attorneys of Volpe and Koenig, P.C. and InterDigital Communications Corporation			

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 24374 *OR* ☐ Correspondence address below

Name					
Address					
Address					
City		State		ZIP	
Country		Telephone		Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Fatih M.	Ozluturk

Inventor's Signature						Date	
Residence: City	Port Washington	State	NY	Country	USA	Citizenship	TR
Post Office Address	70 Willowdale Avenue						
Post Office Address							
City	Port Washington	State	NY	ZIP	11050	Country	USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applications:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
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			☐	☐	☐
			☐	☐	☐
			☐	☐	☐

Additional provisional applications:

Application Number	Filing Date (MM/DD/YYYY)

Additional U.S. applications:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number *(if applicable)*
09/354,042		07/15/1999	
08/671,067		06/27/1996	5,953,346
09/129,850		08/06/1998	
08/670,160		06/27/1996	
09/079,600		05/15/1998	
08/671,221		06/27/1996	5,754,803

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname				
Gary R.			Lomp				
Inventor's Signature	G Lomp					**Date**	8/22/01
Residence: City	Centerport	**State** NY		**Country** USA		**Citizenship**	US
Post Office Address	130 Washington Drive						
Post Office Address							
City	Centerport	**State** NY	**ZIP** 11721		**Country** USA		

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Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature						**Date**	
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OR
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Name					
Address					
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City		State		ZIP	
Country		Telephone		Fax	

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Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Fatih M.	Ozluturk

Inventor's Signature	Fatih M Ozluturk					Date	6/22/01
Residence: City	Port Washington	State	NY	Country	USA	Citizenship	TR
Post Office Address	70 Willowdale Avenue						
Post Office Address							
City	Port Washington	State	NY	ZIP	11050	Country	USA

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Given Name (first and middle (if any))			Family Name or Surname				
Gary R.			Lomp				
Inventor's Signature						Date	
Residence: City	Centerport	State	NY	Country	USA	Citizenship	US
Post Office Address	130 Washington Drive						
Post Office Address							
City	Centerport	State	NY	ZIP	11721	Country	USA

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DECLARATION -- Supplemental Priority Data Sheet

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Application Number	Filing Date (MM/DD/YYYY)

Additional U.S. applications:

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